Billing a CMS 1500 with Multiple Claim Lines

Providers that are currently billing paper claims with the CMS 1500, MDCH has specific

instructions about multiple claims lines. Since you are billing on paper, the CMS 1500 is very limited and only allows for six services lines per claim.

Some providers have more than six services that they need to bill on the same claim. Medicaid does not allow multiple claims to be submitted for these services.

For this situation, providers will need to follow the procedures below.

- Enter the first five services on the first five claim lines as an ordinary claim.
- On line six, use a related Unlisted Procedure code (NOC).
- Charges for line 6F will be the total of the excess codes.
- Enter "See Attached Documentation" in Box 19.
- Include a copy of the operative report.
- Include behind the claim, on a separate sheet of paper, a listing of the procedures that were excessive and replaced with the NOC code. Example below:

Jane Doe ID 12345678

Attachments: Operative report 2 pages
Explanation of excess of 6 claim lines

- 30999 was used to report
 - o 30560 (\$300.00)
 - o 30600 (\$150.00)
- The two procedures are located in the enclosed operative report in paragraphs 2 and 5 consecutively.

Featured Articles

<u>Page 1:</u>

Billing a CMS 1500 with Multiple Claim Lines

Page 2:

- Plan First! Waiver
- Coming Soon: MMIS

Page 3:

- Provider Questions
- Directory Appendix
- > State of Michigan Closings

MDCH does not encourage providers to bill on paper claim forms. The Electronic 837 Professional claim format allows for 50 service lines per claim. Electronic Billing will help to resolve many of these issues

For more questions, please contact the

Provider Inquiry Unit at 1-800-292-2550 or ProviderSupport@michigan.gov.





Plan First! Waiver

The Michigan Department of Community Health will implement Plan First!, which is a new waiver for family planning services. Plan First! will be offered to women of childbearing age, 19-44 years of age, who meet certain criteria.

The Plan First! family planning program is a limited services benefit which covers office visits, routine laboratory, diagnostic tests and surgical procedures associated with family planning. Initial treatment for Sexually Transmitted Infections is covered when provided in conjunction with other family planning services.

This waiver will allow women who are not currently Medicaid eligible, do not have full family planning benefits through private insurance, including Medicare, or who have family income at or below 185 percent of the Federal Poverty Level to receive family planning services. Coverage would be limited to women who reside in Michigan and meet Medicaid citizenship requirements. It is estimated that at least 200,000 women may meet this criteria.

For more information please visit www.michigan.gov/mdch">www.michigan.gov/mdch >> Providers >> Information for Medicaid Providers >> Provider Updates. The Provider Updates page will provide a complete program description and more information on when Plan First! will become a covered Medicaid waiver.



COMING SOON! NEW MMIS SYSTEM

Make sure to keep checking the website and all resources for more information...Medicaid CLAIM STATUS is coming!!!

Provider Questions

MDCH is waiting to post questions from Medicaid providers. We have not received any questions that providers would like to see in the newsletter. Medicaid is making a small change to the way this section will be handled from the article in the April 2006 Provider Inquirer.

Directory Appendix

Within the Medicaid Provider Manual, MDCH has posted a Directory Appendix for all providers. If you need any contact information for MDCH you should be able to find it within the Directory Appendix. This appendix should provide all of the contact information needed to answer all provider questions.

It includes contact information for Provider Assistance, Beneficiary Assistance, Eligibility Verification, Prior Authorization, Billing Resources, Claim Submission/Payment,
Policy/Forms/Publications, Appeals, Health Plan Information, Provider Resources, Hospice Resources, MH/SA Resources, Nursing Facility Resources, Pharmacy Resources, Private Duty Nursing Resources, School Based Services, Vision Services Resources, Reporting Fraud, Abuse, or Misuse of Services, Other Health Care, and Resources/Programs Miscellaneous Contact Information.

Any providers that wish to have a question submitted into the question and answer section should email the question to

<u>ProviderOutreach@michigan.gov</u>. Please make sure to include a subject line of "Provider Inquirer Question".

Make sure to also include in the email if you would like the answer reported within the Provider Inquirer or if you would like just the question posted to receive responses from other Medicaid providers. If you wish to not have your information posted in the Provider Inquirer please indicate that in the email.

This section is for all Medicaid providers, so please take advantage of this. Any questions that you would like to see posted in the Provider Inquirer submit the email to the address above.

The State of Michigan Offices will be closed:

Monday, May 29, 2006 - Memorial Day